				·	Application or Docket Number									
	PATENT A			N FEE DE Novemb			ON RECO	RD			091	 43	574	2/
CLAIMS AS FILED - PART I (Column 1) (Column 2)														
FOR						NUMBER EXTRA			RAT	E	FEE	1 1	RATE	FEE
BASIC FEE											380.00	OR		760.00
TOTAL CLAIMS			// minus 20= *						X\$ 9)=		OR	X\$18=	
INDEPENDENT CLAIMS 2				minus 3 = *					X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							SMALL ENTITY TYPE OR SMALL ENTITY BER EXTRA RATE FEE 380.00 OR X\$ 9= OR X\$ 9= OR X78= OR 110 OTHER THAN SMALL ENTITY OR TOTAL OR TOTAL OR OTHER THAN OR TOTAL OR TOTAL OR OTHER THAN SMALL ENTITY OR TOTAL OR ADDI- TIONAL FEE X\$ 9= OR X\$18= SY. ADDI- TIONAL FEE OR ADDI- TOTAL OR OR TOTAL OR OR ADDI- TOTAL OR OR TOTAL OR TOTAL OR OR TOTAL OR TOTAL OR TOTAL OR ADDI- TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR ADDI- TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR ADDI- TIONAL FEE OR X\$ 9= OR TOTAL OR ADDI- TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR ADDI- TOTAL OR ADDI- TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR TOTAL OR ADDI- TOTAL OR TOTAL OR							
* If	the difference	in colu	mn 1 is	less than ze	ero, e	nter "O" in c	olumn 2	-				4 1	TOTAL	NU
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									· · · · · · · · · · · · · · · · · · ·					
NTA		CL REM AF	IMN 1) AIMS AINING TER IDMENT		PR	Olumn 2) HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT				ADDI- TIONAL		_	ADDI- TIONAL
AMENDMENT	Total	• 6	13	Minus	**	20	- 3		X\$ 9)=		OR	X\$18=	54.
ME	Independent	*	2	Minus	***	3	=]	X39	=		OR	X78=	
lacksquare	FIRST PRESE	NTATIC	N OF MU	JLTIPLE DEF	PEND	ENT CLAIM]	.10	_		1	+260=	
												4	<u> </u>	511
											<u> </u>	OR	ADDIT. FEE	DYEC
<u> </u>	Processor and the second		umn 1)_ AIMS	SPACE COMPANY		olumn 2) HIGHEST	(Column 3)	1	,		1	1		ADDE
AMENDMENT B		REM AF	AINING TER IDMENT		PR	NUMBER EVIOUSLY PAID FOR			RAT	E	TIONAL		RATE	TIONAL
	Total	. 1	6	Minus	**	23	= /		X\$ 9)=		OR	X\$18=	
	Independent	·		Minus	***	3_	=/		X39	=		OR	X78=	
	FIRST PRESE	NTATIC	N OF MU	JLTIPLE DEF	PEND	ENTCLAIM		J	+130) <u> </u>		1	+260=	
									TO	TAL			TOTAL	,
	_	(Col·	ımp 1\		(C	olumn 2)	(Column 3)		AUUIT.	·ct		-	ADDII. FEE	
AT C		CL REM	JIMN 1) AIMS AINING TER		l PR	HIGHEST NUMBER JEVIOUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Tabal		DMENT	Minus		PAID FOR		1			FEE		V040	FEE
END	Total Independent	*		Minus Minus	**		=	1	X\$ 9			OR	X\$18=	ļ
AM	FIRST PRESE	NTATIC	N OF M		<u> </u>		<u> </u>	$\ \cdot \ $	X39	=		OR	X78=	
Н	THOTPHESE		01 111		J. 10			•	+130	=		OR	+260=	
•	f the entry in colu If the "Highest Nu	mn 1 is lo	ess than th	e entry in colu	mn 2, S SP4	write "0" in col	lumn 3. n 20. enter "20)." }."		TAL		OR	TOTAL ADDIT. FEE	
***	if the "Highest Nu If the "Highest Nu The "Highest Num	mber Pre	wiously Pa	aid For' IN THI	IS SPA	CE is less tha	in 3. enter "3."		ADDIT. I und in th		propriate bo			